

01-28-02

A

Please type a plus sign (+) inside this box →

PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0551-0032

Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))		Attorney Docket No. LIBE0034
First Inventor or Application Identifier: Xiao		
Title: Trust Information Delivery Scheme for Certificate Validation		
Express Mail Label No. EL540887534US		

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 39] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 6]</p> <p>4. Oath or Declaration [Total Pages 2]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p>		
<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 		
ACCOMPANYING APPLICATION PARTS		
<p>7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) <input checked="" type="checkbox"/> Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input type="checkbox"/> Receipt Request Postcard (MPEP 503) (Should be specifically itemized)</p> <p>13. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) <input type="checkbox"/> Status still proper and desired (PTO/SB/08-12)</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input type="checkbox"/> Other: _____</p>		

NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUATING APPLICATION, check appropriate box, and supply the requested information below and in a preliminary amendment.

Continuation Divisional Continuation-in-part (CIP) of prior application No. **09/ J. 330,274**

Prior application information: Examiner: Unknown Group / Art Unit: Unknown

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	22862	<input type="checkbox"/> Correspondence address below
(Insert Customer No. or Attach bar code label here)		
Name		
Address		
City	State	Zip Code
Country	Telephone	Fax

Name (Print/Type)	Michael A. Glenn	Registration No. (Attorney/Agent)	30,176
Signature		Date	1/25/02

Estimated Time to Complete: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL		Complete if Known	
for FY 1999		Application Number	Unassigned
Patent fees are subject to annual revision. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12, See 37 C.F.R. §§ 1.27 and 1.28.		Filing Date	Herewith
		First Named Inventor	Xiao
		Examiner Name	Unassigned
		Group / Art Unit	Unassigned
		Attorney Docket No.	LIBE0034
TOTAL AMOUNT OF PAYMENT (\$ 1,806.00)			

METHOD OF PAYMENT (check one)		FEES CALCULATION (continued)	
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:		3. ADDITIONAL FEES	
Deposit Account Number	07-1445	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)
Deposit Account Name	Glenn Patent Group	Fee Description	Fee Paid
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17		105 130 205 65 Surcharge - late filing fee or oath 127 50 227 25 Surcharge - late provisional filing fee or cover sheet. 139 130 139 130 Non-English specification 147 2,520 147 2,520 For filing a request for reexamination 112 920* 112 920* Requesting publication of SIR prior to Examiner action 113 1,840* 113 1,840 Requesting publication of SIR after Examiner action 115 110 215 55 Extension for reply within first month 116 380 210 190 Extension for reply within second month 117 870 217 435 Extension for reply within third month 118 1,360 218 680 Extension for reply within fourth month 128 1,850 228 925 Extension for reply within fifth month 119 300 210 150 Notice of Appeal 120 300 220 150 Filing a brief in support of an appeal 121 260 221 130 Request for oral hearing 138 1,510 138 1,510 Petition to institute a public use proceeding 140 110 240 55 Petition to revive - unavoidable 141 1,210 241 605 Petition to revive - unintentional 142 1,210 242 605 Utility issue fee (or reissue) 143 430 243 215 Design issue fee 144 580 244 290 Plant issue fee 122 130 122 130 Petitions to the Commissioner 123 50 123 50 Petitions related to provisional applications 126 240 126 240 Submission of Information Disclosure Stmt 581 40 581 40 Recording each patent assignment per property (times number of properties) 146 760 246 380 Filing a submission after final rejection 149 760 249 380 (37 CFR § 1.129(a)) For each additional invention to be examined (37 CFR § 1.129(b))	
1. BASIC FILING FEE Large Entity Small Entity Fee Code (\$) Fee Code (\$) Fee Description 101 760 201 380 Utility filing fee 106 310 206 155 Design filing fee 107 480 207 240 Plant filing fee 108 760 208 380 Reissue filing fee 114 150 214 75 Provisional filing fee		Fee Paid 740.00	
SUBTOTAL (1) (\$ 740.00)			
2. EXTRA CLAIM FEES Large Entity Small Entity Fee Code (\$) Fee Code (\$) Fee Description Total Claims 49 - 20* = 29 X 18 = 522. Independent 9 - 3** = 6 X 84 = 504. Claims Multiple Dependent		Fee from Extra Claims Fee Paid 504	
*or number previously paid, if greater; For Reissues, see below Large Entity Small Entity Fee Code (\$) Fee Code (\$) Fee Description 103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid 109 78 209 39 ** Reissue independent claims over original patent 110 18 210 9 ** Reissue claims in excess of 20 and over original patent		Fee Paid 40.00	
SUBTOTAL (2) (\$ 1,026.00)		SUBTOTAL (3) (\$ 40.00)	
Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 40.00)			

SUBMITTED BY		Complete if applicable	
Name (Print/Type)	Michael A. Glenn	Registration No. (Attorney/Agent)	30,176
Signature		Telephone	650-474-8400
		Date	1/25/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231